



Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

Complete if Known

Application Number	10/675,997
Filing Date	October 2, 2003
First Named Inventor	Hiroyuki MARUYAMA
Examiner Name	P. B. Kim
Art Unit	2851
Attorney Docket No.	00862.023265

☐ Applicant claims small entity status. See 37 C.F.R. 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 0.00
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METHOD OF PAYMENT (check all that apply)

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____
☒ Deposit Account
 Deposit Account Number: 06-1205
 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/>	Charge fee(s) indicated below	<input type="checkbox"/>	Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/>	Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17	<input checked="" type="checkbox"/>	Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	

2. EXCESS CLAIM FEES

2. EXCESS CLAIM FEES		Small Entity
Fee Description	Fee(\$)	Fee(\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
9	- 20 or HP = 0	x 50.00	= 0.00	
HP = highest number of total claims paid for, if greater than 20				
				<u>Fee(\$)</u> <u>Fee Paid (\$)</u>

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>
<u>1</u>	- 3 or (HP) = <u>0</u>	x <u>200.00</u>	= <u>0.00</u>
HP = highest number of independent claims paid for, if greater than 3			

3. APPLICATION SIZE FEE

If the specification, drawings, and any Preliminary Amendment exceed 100 sheets of paper in total, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	250.00	= _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

Signature	Jack S. Cubert	Registration No. 24,245 (Attorney/Agent)	Telephone 212-218-2100
Name (Print/Type)			Date: December 27, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions



00862.023265

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: P. B. Kim
Hiroyuki MARUYAMA)	
	:	Group Art Unit: 2851
Application No.: 10/675,997)	
	:	Confirmation No.: 7794
Filed: October 2, 2003)	
	:	
For: DEVICE MANUFACTURING APPARATUS)	December 27, 2005
		(After Federal Holiday)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Prior to further examination on the merits, please amend the above-identified application
as follows: